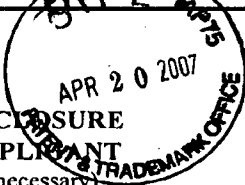


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| Substitute for form 1449/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT (Use as many sheets as necessary) | |  | | Complete if Known | |
| | | Application Number | | 10/587,207 | |
| | | Filing Date | | July 25, 2006 | |
| | | First Named Inventor | | Michael Siskin et al | |
| | | Art Unit | | | |
| | | Examiner Name | | | |
| Attorney Docket Number | | | | | |
| Sheet | 1 | of | 2 | Family Number | P2004J003 |

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|--------------------|---------------|-----------------|------------|
| Examiner Signature | /Brian Davis/ | Date Considered | 01/19/2009 |
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| Attorney Docket Number | | | | | |
| Sheet | 2 | of | 2 | Family Number | P2004J003 |

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| Examiner Initials* | Cite No. ¹ | Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published. | T ² |
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